

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>W. G.</i>		12/21/99
O.I.P.E. CLASSIFIER		48	1/18/00
FORMALITY REVIEW	DML	091651	1-18-00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
1	✓	✓	11/5/20
2	✓	✓	11/5/20
3	✓	✓	11/5/20
4	✓	✓	11/5/20
5	✓	✓	11/5/20
6	✓	✓	11/5/20
7	✓	✓	11/5/20
8	✓	✓	11/5/20
9	✓	✓	11/5/20
10	✓	✓	11/5/20
11	✓	✓	11/5/20
12	✓	✓	11/5/20
13	✓	✓	11/5/20
14	✓	✓	11/5/20
15	✓	✓	11/5/20
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18	✓	✓	11/5/20
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25	✓	✓	11/5/20
26	✓	✓	11/5/20
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28	✓	✓	11/5/20
29	✓	✓	11/5/20
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42	✓	✓	11/5/20
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44	✓	✓	11/5/20
45	✓	✓	11/5/20
46	✓	✓	11/5/20
47	✓	✓	11/5/20
48	✓	✓	11/5/20
49	✓	✓	11/5/20
50	✓	✓	11/5/20

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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